

## **PART FOUR: APPENDICES**

**☒ Updates:** All Appendices are required in the first year of the Four-Year Area Plan. An Updated Appendix II is required annually, and other Appendices must be updated when changes occur. All of the Appendix templates provided in this section are intended to be modified as needed for use throughout the four-year planning period.

### **a. Purpose:**

The purpose of the Appendices is to supplement or clarify existing information provided by the AAA.

Some Appendices reflect requirements of the OAA, CFR, and the CCR. Others provide informational materials to assist the AAAs in developing their Area Plans and subsequent Updates.

Appendix X has been added to allow for better collection of data related to Legal Services.

### **b. Required Content:**

Appendices I – VIII and Appendix X-XIII

Appendix IX includes resource information only.

## **APPENDIX IA - PSA # \_\_\_\_\_**

### **NOTICE OF INTENT TO PROVIDE DIRECT SERVICES**

CCR Article 3, Section 7320 (a) (b)

If an AAA plans to directly provide any of the following services, it is required to provide a description of the methods that will be used to assure that target populations throughout the PSA will be served. If not providing any of the direct services below, check this box ☐.

Check applicable direct services

Check each applicable Fiscal Year(s)

Title III B

☐ Information and Assistance

☐ FY 2005-06 ☐ FY 06-07 ☐ FY 07-08 ☐ FY 08-09

Title III B

☐ Case Management

☐ FY 2005-06 ☐ FY 06-07 ☐ FY 07-08 ☐ FY 08-09

Title III B

☐ Outreach

☐ FY 2005-06 ☐ FY 06-07 ☐ FY 07-08 ☐ FY 08-09

Title III B

☐ Program Development

☐ FY 2005-06 ☐ FY 06-07 ☐ FY 07-08 ☐ FY 08-09

☐ Coordination

☐ FY 2005-06 ☐ FY 06-07 ☐ FY 07-08 ☐ FY 08-09

Title III D

☐ Disease Prevention  
and Health Promotion

☐ FY 2005-06 ☐ FY 06-07 ☐ FY 07-08 ☐ FY 08-09

Title III E

☐ Outreach to Caregivers

☐ FY 2005-06 ☐ FY 06-07 ☐ FY 07-08 ☐ FY 08-09

Title III E

☐ Information and Assistance to  
Caregivers

☐ FY 2005-06 ☐ FY 06-07 ☐ FY 07-08 ☐ FY 08-09

Title III E

☐ Comprehensive Assessment of  
Caregivers

☐ FY 2005-06 ☐ FY 06-07 ☐ FY 07-08 ☐ FY 08-09

Title III E

☐ Case Management for Caregivers

☐ FY 2005-06 ☐ FY 06-07 ☐ FY 07-08 ☐ FY 08-09

Title VII b

☐ Prevention of Elder Abuse,  
Neglect, and Exploitation

☐ FY 2005-06 ☐ FY 06-07 ☐ FY 07-08 ☐ FY 08-09

**Describe the methods that will be used to assure that target populations will be served throughout the PSA. \_\_\_\_\_**

## **APPENDIX IB - PSA # \_\_\_\_\_**

### **REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES**

Older Americans Act, Section 307(a)(8)  
CCR Article 3, Section 7320(c), W&I Code Section 9533(f)

If an AAA plans to provide direct services **other** than those specified in Appendix IA, a **separate Appendix IB must be completed for EACH type of service provided.** The submission for CDA approval may be for multiple funding sources for a specific service. If not requesting approval to provide any direct services in Appendix IB, check this box ☐.

**Identify Service Category:** \_\_\_\_\_

Check applicable funding source:<sup>15</sup>

☐ III B ☐ III C-1 ☐ III C-2 ☐ III E ☐ VII a

☐ CBSP (Identify the specific CBSP program or service on the "Service Category" line above)

☐ HICAP

Basis of Request for Waiver:

☐ Necessary to Assure an Adequate Supply of Service, OR

☐ More economical if provided by the AAA than comparable services purchased from a service provider.

**Check each applicable Fiscal Year(s)**

☐ FY 2005-06

☐ FY 2006-07

☐ FY 2007-08

☐ FY 2008-09

**Justification:** In the space below and/or through additional documentation, **AAAs must provide a cost-benefit analysis that substantiates any requests for direct delivery of the above stated service.**<sup>16</sup> \_\_\_\_\_

<sup>15</sup> Appendix IB does not apply to Title V (SCSEP)

<sup>16</sup> For a HICAP direct services waiver, the managing AAA of HICAP services must also document that all affected AAAs are in agreement

## **APPENDIX II – PSA #**

**Check each applicable planning cycle:**

☐ FY 2005-06

☐ FY 2006-07

☐ FY 2007-08

☐ FY 2008-09

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### **PUBLIC HEARINGS**

#### **Conducted for the 2005-2009 Planning Period**

CCR Article 3, Section 7302(a)(10) and Section 7308

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| <b>Date</b> | <b>Location</b> | <b>Number<br/>Attending</b> | <b>Area Plan<br/>presented<br/>with<br/>Translator:<br/><sup>17</sup><br/>Yes/No</b> | <b>Hearing<br/>Held at<br/>Long-<br/>Term<br/>Care<br/>Facility:<sup>18</sup><br/>Yes/No</b> |
|-------------|-----------------|-----------------------------|--|--|
|             |                 |                             |  |  |
|             |                 |                             |  |  |
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|             |                 |                             |  |  |

#### **All of the items below must be discussed at each planning cycle's Public Hearings**

1. Discuss outreach efforts used in seeking input into the Area Plan from institutionalized, homebound, and/or disabled older individuals.
2. Proposed expenditures for Program Development (PD) and Coordination (C) must be discussed at a public hearing. Did the AAA discuss PD and C activities at a public hearing?

☐ Yes

☐ Not Applicable (check only if PD and C funding is not being used)

☐ No

If No, Explain:

3. Summarize the comments received concerning proposed expenditures for PD and C, if applicable.
4. Were all interested parties in the PSA notified of the public hearing and provided the opportunity to testify regarding setting of minimum percentages of Title III B program funds to meet the adequate proportion funding for Priority Services? (*See Appendix V*)  
☐ Yes  
☐ No  
If No, Explain:
5. Summarize the comments received concerning minimum percentages of Title III B funds to meet the adequate proportion funding for priority services. (*See Appendix V*)
6. Summarize other major issues discussed or raised at the public hearings.
7. List major changes in the Area Plan resulting from input by attendees at the hearings.

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<sup>17</sup> A Translator is not required unless the AAA determines that a significant number of attendees require translation services.

<sup>18</sup> AAAs are encouraged to include individuals in LTC facilities in the planning process, but hearings are not required to be held in facilities.

## **APPENDIX III – PSA # \_\_\_\_\_**

**Check each applicable planning cycle:**

☐ FY 2005-06

☐ FY 2006-07

☐ FY 2007-08

☐ FY 2008-09

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### **GOVERNING BOARD**

CCR Article 3, Section 7302(a)(11)

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**Number of Members on the Board:** \_\_\_\_\_

**Names/Titles of Officers:**

**Term in Office Expires:**

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**Names/Titles of All Members:**

**Term on Board Expires:**

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## **APPENDIX IV – PSA # \_\_\_\_\_**

**Check each applicable planning cycle:**

☐ 2005-06

☐ FY 2006-07

☐ FY 2007-08

☐ FY 2008-09

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### **ADVISORY COUNCIL**

45 Code of Federal Regulations (CFR), Section 1321.57

CCR Article 3, Section 7302 (a) (12)

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**Total Council Membership (including vacancies)** \_\_\_\_\_

Number of Council Members 60+ \_\_\_\_\_

% of PSA's  
60+Population

% on  
Advisory Council

**Race/Ethnic Composition**

White \_\_\_\_\_

Hispanic \_\_\_\_\_

Black \_\_\_\_\_

Asian/Pacific Islander \_\_\_\_\_

Native American/Alaskan Native \_\_\_\_\_

Other \_\_\_\_\_

**Attach a copy of the current advisory council membership roster that includes:**

- Names/Titles of officers and date term expires
- Names/Titles of other Advisory Council members and date term expires

**Indicate which member(s) represent each of the "Other Representation" categories listed below.**

|  | <u>Yes</u>               | <u>No</u>                |
|--|--------------------------|--------------------------|
| Low Income Representative  | <input type="checkbox"/> | <input type="checkbox"/> |
| Disabled Representative  | <input type="checkbox"/> | <input type="checkbox"/> |
| Supportive Services Provider Representative                                    | <input type="checkbox"/> | <input type="checkbox"/> |
| Health Care Provider Representative  | <input type="checkbox"/> | <input type="checkbox"/> |
| Local Elected Officials  | <input type="checkbox"/> | <input type="checkbox"/> |
| Individuals with Leadership Experience in<br>the Private and Voluntary Sectors | <input type="checkbox"/> | <input type="checkbox"/> |

**Explain any "No" answer.** \_\_\_\_\_

**Briefly describe the process designated by the local governing board to appoint Advisory Council members.** \_\_\_\_\_

## **APPENDIX V – PSA # \_\_\_\_\_**

**Check each applicable planning cycle:**

☐ 2005-06

☐ FY 2006-07

☐ FY 2007-08

☐ FY 2008-09

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### **PRIORITY SERVICES:**

#### **Funding for Access, In-Home Services, and Legal Assistance**

The CCR, Article 3, Section 7312, requires that the AAA allocate an “adequate proportion” of federal funds to provide Access, In-Home Services, and Legal Assistance in the PSA. The annual minimum allocation is determined by the AAA through the planning process. The minimum percentages of applicable Title III B funds<sup>19</sup> listed below have been identified for annual expenditure throughout the four-year planning period. These percentages are based on needs assessment findings, resources available within the PSA, and discussions at public hearings on the Area Plan.

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#### **Category of Service & Percentage of Title III B Funds Expended in/or To Be Expended in FY 2005-06 through FY 2008-09**

##### **Access:**

Case Management, Assisted Transportation, Transportation,  
Information and Assistance, and Outreach

05-06 \_\_\_\_% 06-07 \_\_\_\_% 07-08 \_\_\_\_% 08-09 \_\_\_\_%

##### **In-Home Services:**

Personal Care, Homemaker and Home Health Aides, Chore, In-Home Respite, Daycare as respite services for families, Telephone Reassurance, Visiting, and Minor Home Modification

05-06 \_\_\_\_% 06-07 \_\_\_\_% 07-08 \_\_\_\_% 08-09 \_\_\_\_%

##### **Legal Assistance Required Activities<sup>20</sup>:**

Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar

05-06 \_\_\_\_% 06-07 \_\_\_\_% 07-08 \_\_\_\_% 08-09 \_\_\_\_%

1. Explain how allocations are justified and how they are determined to be sufficient to meet the need for the service within the PSA. \_\_\_\_\_
2. ☒ Appendix V must be updated if the minimum percentages change from the initial year of the four-year plan.
3. Provide documentation that prior notification of the Area Plan public hearing(s) was provided to all interested parties in the PSA and that the notification indicated that a change was proposed, the proposed change would be discussed at the hearing, and all interested parties would be given an opportunity to testify regarding the change. \_\_\_\_\_
4. Submit a record (e.g., a transcript of that portion of the public hearing(s) in which adequate proportion is discussed) documenting that the proposed change in funding for this category of service was discussed at Area Plan public hearings. \_\_\_\_\_

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<sup>19</sup> Minimum percentages of applicable funds are calculated on the annual Title III B baseline allocation, minus Title III B administration and minus Ombudsman. At least one percent of the final Title III B calculation must be allocated for each “Priority Service” category or a waiver must be requested for the Priority Service category(s) that the AAA does not intend to fund.

<sup>20</sup> Legal Assistance must include all of the following activities: Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar.

## **APPENDIX VI – PSA # \_\_\_\_\_**

**Check each applicable planning cycle:**

☐ FY 2005-06

☐ FY 2006-07

☐ FY 2007-08

☐ FY 2008-09

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### **COMMUNITY FOCAL POINTS LIST**

CCR Article 3, Section 7302(a)(14)

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Provide an updated list of designated community focal points and their addresses. This information must match the National Aging Program Information System (NAPIS) SPR 106.

\_\_\_\_\_



## APPENDIX VII – PSA # \_\_\_\_\_

**Check each applicable planning cycle:**

☐ FY 2005-06   ☐ FY 2006-07   ☐ FY 2007-08   ☐ FY 2008-09

**MULTIPURPOSE SENIOR CENTER (MPSC)  
ACQUISITION<sup>21</sup> AND<sup>22</sup> CONSTRUCTION COMPLIANCE REVIEW**  
CCR Title 22, Article 3, Section 7302(a) (15)  
**(This has a 20-year tracking requirement.)**

- ☐ No, Title III B funds have not been used for MPSC Acquisition or Construction.
- ☐ Yes, Title III B funds have been used for MPSC Acquisition or Construction.  
If yes, complete the chart below.

| Title III Grantee and/or<br>Senior Center | Type<br>Acq/Const | III B Funds<br>Awarded | % of<br>Total<br>Cost | Recapture Period<br>MM/DD/YY |      | Compliance<br>Verification<br>(State Use<br>Only) |
|---|-------------------|------------------------|-----------------------|------------------------------|------|---|
|   |                   |                        |                       | Begin                        | Ends |   |
| Name:<br>Address:                         |                   |                        |                       |                              |      |   |
| Name:<br>Address:                         |                   |                        |                       |                              |      |   |
| Name:<br>Address:                         |                   |                        |                       |                              |      |   |
| Name:<br>Address:                         |                   |                        |                       |                              |      |   |
| Name:<br>Address:                         |                   |                        |                       |                              |      |   |

<sup>21</sup> Acquisition is defined as obtaining ownership of an existing facility (in fee simple or by lease for 10 years or more) for use as an MPSC.

<sup>22</sup> Construction is defined as building a new facility, including the costs of land acquisition, architectural and engineering fees, or making modifications to, or in connection with an existing facility, which more than doubles the square footage of that original facility and all physical improvements.

## **APPENDIX VIII – PSA # \_\_\_\_\_**

**Check each applicable planning cycle:**

☐ FY 2005-06   ☐ FY 2006-07   ☐ FY 2007-08   ☐ FY 2008-09

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### **FAMILY CAREGIVER SUPPORT PROGRAM Notice of Intent for Non-Expenditure of Funds Older Americans Act Section 373 (b)**

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Based on review of current family caregiver support needs and services, does the AAA **intend** to fund the following federal support service(s)?

Check ☐ YES or ☐ NO for each of the services identified below.

#### **Support Service**

Service Information ☐ YES ☐ NO  
(Information to caregivers about available services)

Access ☐ YES ☐ NO  
(Assistance to caregivers in gaining access to services)

Caregiver Support Services ☐ YES ☐ NO

Respite ☐ YES ☐ NO  
(Respite care to enable caregivers to be temporarily relieved from their care giving responsibilities)

Supplemental Services ☐ YES ☐ NO  
(Supplemental services, on a limited basis, to complement the care provided by the caregivers)

**Justification:** For any of the five support services the AAA does not intend to fund, explain why each service will not be funded and how each service is being addressed in the PSA:

# **Appendix IX Resource Tools**

**Organization Chart-County**

**Organization Chart-AAA**

**Planning Process Diagram**

**Program Descriptions and Funding Sources**

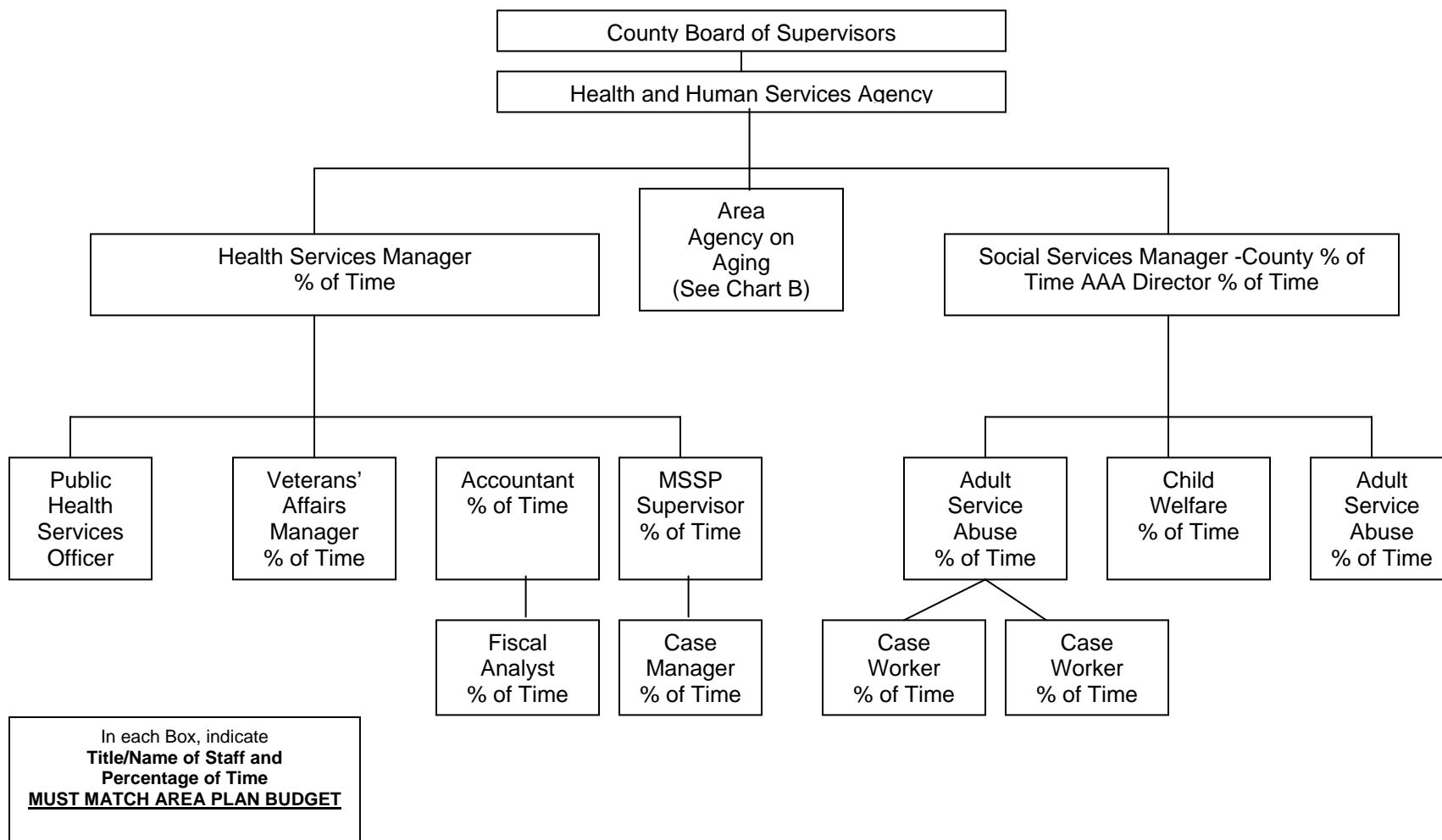
**Title III D Fact Sheet Disease Prevention /  
Health Promotion Including Medication Management**

**Title III Long Term Care Ombudsman Fact Sheet**

**Title VII Elder Abuse Fact Sheet**

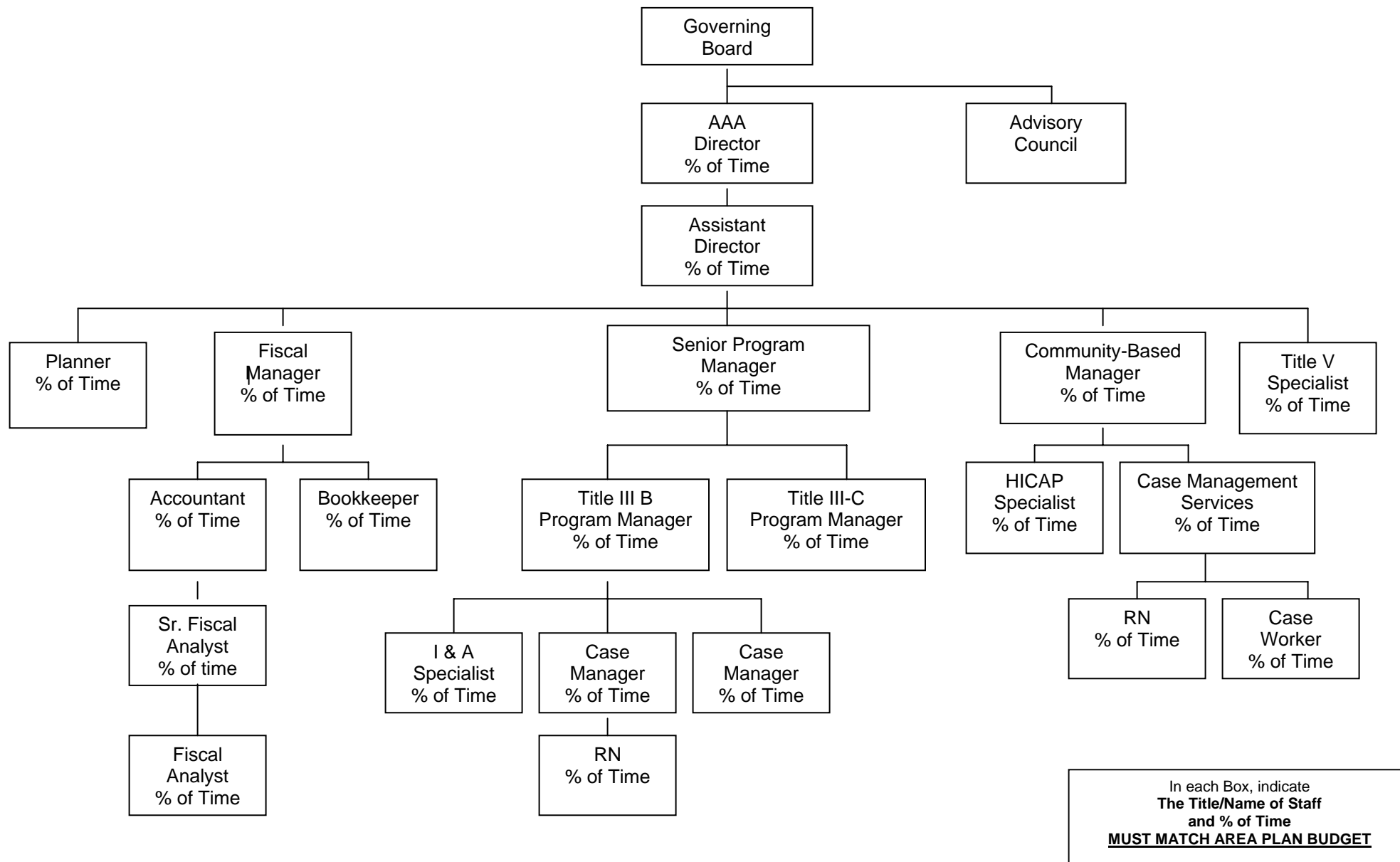
## Sample Organization Chart

### COUNTY


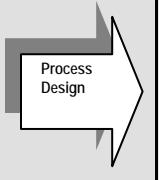


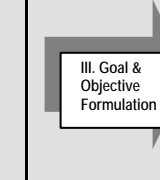
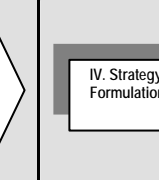
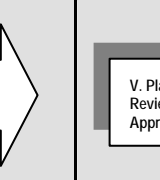
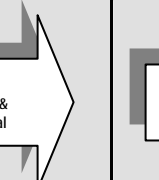
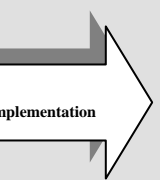


# Sample Organization Chart

## AAA



## Planning Process Diagram

| Planning Phases    | Pre-Planning   |   | Planning  |  |   |  |  | Post-Planning   |  |
|--------------------|--|---|---|--|---|--|--|---|--|
| Planning Stages    |   |    |    |   |   |   |   |    |   |
| Planning Tasks     | <ul style="list-style-type: none"> <li>Determine purpose and readiness</li> <li>Explore Preliminary issues and concerns</li> <li>Profile existing plans and implementation tools for their effectiveness</li> <li>Build capacity to conduct planning participation</li> <li>Identify planning participants and stakeholders</li> </ul> | <ul style="list-style-type: none"> <li>Design the planning process</li> <li>Identify opportunities for public participation and education</li> <li>Establish roles, responsibilities, and membership of groups involved in planning</li> <li>Establish budget and identify funding sources</li> <li>Identify or review mission</li> </ul> | <ul style="list-style-type: none"> <li>Identify data and information needs</li> <li>Gather technical and citizen based data</li> <li>Analyze and interpret data to derive patterns and trends</li> <li>Provide information to citizens and other decision-makers</li> <li>Access census data and analyze</li> <li>Perform gap analysis</li> </ul> | <ul style="list-style-type: none"> <li>Identify key community issues, challenges, opportunities and desires</li> <li>Verify and support issues using local data and analysis</li> <li>Prioritize issues</li> </ul> | <ul style="list-style-type: none"> <li>Develop goals and measurable objectives related to planning issues</li> <li>Develop indicators to monitor progress towards stated goals and objectives</li> <li>Follow Area Plan Guidance to format objectives</li> <li>Develop Service Unit Plan (SUP)</li> </ul> | <ul style="list-style-type: none"> <li>Develop planning alternative to meet goals and objectives</li> <li>Identify places suitable for achieving goals and objectives</li> <li>Identify possible strategies or techniques to implement planning alternatives</li> <li>Select preferred alternatives and strategies</li> <li>Estimate expected outcome, effects, and impacts of each alternative</li> <li>In depth analysis of alternatives making the first cut</li> </ul> | <ul style="list-style-type: none"> <li>Present plan for community and officials to review</li> <li>Make changes to resolve plan inconsistencies and reflect public concerns</li> <li>Advisory Council or AAA staff recommends final draft of plan for adoption</li> <li>Governing body holds public hearing and formally adopts plan</li> <li>Plan submitted to CDA</li> </ul> | <ul style="list-style-type: none"> <li>Develop or amend required implementation tools</li> <li>Apply implementation strategy</li> <li>Implementation tools include monitoring, procurement and reporting tools</li> </ul> | <ul style="list-style-type: none"> <li>Monitor progress towards achieving plan goals, objectives and SUPs</li> <li>Review and update plan and associated implementation tools as needed</li> <li>Follow AP Guidance for plan updates and amendments</li> </ul> |
| Planning Tools     | <b>Selected Examples (Not an exhaustive list)</b>  |   |   |  |   |  |  |   |  |
| Awareness Tools:   | Advertise project with mass media  |   | Use mass media to advertise upcoming data open house  | Mail data issue analysis to stimulate interest   | Send meeting notices in advance of meetings   | Use community displays to showcase planning alternatives   | Send out notice of public hearings   |   |  |
| Education Tools:   | Plan Advisory Council Training   | Send out newsletter to update citizens on plan process  | Conduct data training for Advisory Council  | Interpreting data education for interested officials/public  | Conduct "how to" set measurable objectives education for Advisory Council & AAA staff   | Send out newsletters describing how alternatives were created  | Use Website and educational forum to discuss plan  |   |  |
| Input Tools:       | Fact Sheets  |   | Gather citizen input from data open house   | Use mail survey to identify local issues and opinions  |   | Gather public input from Web forum and open houses   | Hold public hearing to solicit public comment  |   | Conduct survey to identify plan success or failure   |
| Interaction Tools: |  |   | Use local residents to verify data accuracy   | Conduct focus groups to prioritize relevant issues   |   | Use community workshops to explore alternative strategies  |  |   | Conduct an annual progress review of the plan with the Advisory Council  |
| Partnership Tools: | Develop advisory group to help design plan process   |   |   | Brainstorm with Advisory Council members to identify issues  | Advisory Council members set goals and objectives using member input  | Brainstorming alternatives using Delphi techniques with Advisory Council to learn diverse views  | Advisory Council & AAA staff recommends plan to Board for adoption   | Use Advisory Council to identify suitable implementation tools  | Employ Advisory Council to monitor progress of implementation  |

\* With Special thanks to the Center for Land Use Education. *The Land Use Tracker*, Volume 3, Issue 3, Winter 2004

## Program Descriptions and Funding Sources

### Older Americans Act and Older Californians Act Programs

| Funding Source   | Eligibility  | Program or Service  |
|--|--|---|
| <b>Older Americans Act Funding</b>   |  |   |
| <b>Title III B</b><br>Supportive Services  | 60 years old   | Information & assistance/referrals, in-home assistance, legal assistance, transportation, & other types of supportive services to decrease isolation & help individuals remain in their homes.  |
| <b>Title III B &amp; Title VII (a)</b><br>Long Term Care (LTC)<br>Ombudsman      | Residents of<br>LTC Facilities                             | Investigation & resolution of complaints made by or on behalf of residents; abuse investigations & reporting; witnessing advance directives; providing community education; & maintaining a regular presence in facilities.   |
| <b>Title VII (b)</b><br>Elder Abuse Prevention                                   | 60 year old<br>victims                                     | Activities to develop, strengthen, & carry out programs for prevention & treatment of elder abuse, neglect, & exploitation.   |
| <b>Title III C- 1</b><br>Congregate Nutrition                                    | 60 years old &<br>spouses                                  | Nutritious meals & nutrition education provided for socialization and health promotion in a congregate setting.   |
| <b>Title III C-2</b><br>Home-Delivered Meals                                     | 60 years old,<br>homebound &<br>spouses                    | Nutritious meals & nutrition education for individuals who are homebound due to illness, incapacitation, disability or otherwise isolated.  |
| <b>Title III D</b><br>Disease Prevention/ Health<br>Promotion                    | 60 years old   | Exercise & health-related programs to improve health & alleviate disease. Includes medication management education & assistance.  |
| <b>Title III E</b><br>Family Caregiver Support<br>Program                        | Caregivers as<br>defined                                   | Services to assist caregivers of frail individuals 60 or over, & assistance to seniors 60 & older in a "grandparent" capacity, who provide primary care for a child 18 or younger.  |
| <b>Title V</b><br>Senior Community Services<br>Employment Program<br>(SCSEP)     | 55 years &<br>older; low<br>income                         | Part-time employment to assist & promote placement of hard-to-serve older individuals into private, unsubsidized employment opportunities.  |
| <b>Older Californians Act Funding – Community-Based Services Programs (CBSP)</b> |  |   |
| Alzheimer's Day Care<br>Resource Centers (ADCRC)                                 | Dementia<br>victims &<br>caregivers<br>18 years &<br>older | Day care for persons with moderate to severe impairment, support groups, counseling, and consultation for clients & their caregivers.   |
| Brown Bag  | 60 years &<br>older; low<br>income<br>(SSI/SSP)            | Surplus & donated edible fruits, vegetables, & other food products are distributed to supplement the nutritional needs of participants.   |
| Linkages   | Functionally<br>impaired; 18<br>years & older              | Case management services to assess & monitor client needs and link clients with services that foster & maintain independence.   |
| Respite Purchase of Services<br>(RPOS)   | Same as<br>Linkages  | Purchase of respite services for caregivers of frail elderly & functionally impaired adults. (Do not have to be Linkages clients.)  |
| Senior Companion   | 60 years &<br>older; low<br>income                         | Volunteer opportunities for seniors to assist clients that are homebound or in institutional settings with chores, light housekeeping, paying bills, shopping, & transportation to medical & other appointments. (Volunteers receive a tax-exempt stipend, a meal, & insurance coverage.) |
| <b>Older Americans Act and Older Californians Act and State General Funds</b>    |  |   |
| Health Insurance Counseling<br>& Advocacy Program (HICAP)                        | 60 years old   | Counseling & informal advocacy services for Medicare beneficiaries, legal assistance on Medicare issues, and community education for the public on related issues.  |

# Fact Sheet – Title III D

## Disease Prevention / Health Promotion, Including Medication Management

### *Instructions for Completion of the Service Unit Plan Objectives*

**Contact Persons:** Barbara Estrada, [bestrada@aging.ca.gov](mailto:bestrada@aging.ca.gov) (916) 928-3330  
Violet Henry, [vhenry@aging.ca.gov](mailto:vhenry@aging.ca.gov) , (916) 928-5858

**Requirements:** Title III D services are required. The allowable service categories reported as Title III D Service Unit Plan Objectives are outlined in Division 4000 of the MIS operations manual (January, 1994). Additional guidance for Title III D activities that qualify under the allowable service categories is also included below.

Disease Prevention and Health Promotion services and information are provided at multipurpose senior centers, at congregate meal sites, through home delivered meals programs or at other appropriate sites.

**Insert the number of units of service in the Disease Prevention/Health Promotion and Medication Management tables in the Title III/VII Service Unit Plan Objectives. Because of the nature of Disease Prevention/ Health Promotion and Medication Management activities, the AAA's are also requested to continue providing written objectives for all services provided with Title III D funds.** The objective should clearly explain the activity that is being performed to fulfill the service unit requirement. Include a brief written statement describing the III D activities provided in the Year-End Report.

#### UNITS OF SERVICE:

|                          |                               |
|--------------------------|-------------------------------|
| (07) Counseling Advocacy | (32) Comprehensive Assessment |
| (09) Community Education | (36) Home Security            |
| (13) Health Screening    | (38) Equipment                |
| (16) Information         | (46) Family Support           |
| (21) Physical Fitness II | (52) Nutrition Education      |
| (19) Outreach            | (53) Nutrition Counseling     |
| (29) Therapy             | (54) Nutrition Screening      |

#### (MIS Unit No.) Definition

(07) Counseling: To provide advice, guidance, and casework support for clients, their families/caregivers in order to enable the clients to make more effective use of services from caregivers/programs. **UNIT: one hour**

(09) Community Education/Advocacy: To educate groups of older persons, their families, friends, and community organization/facility staff on rights, benefits, and entitlements for older persons either residing at home or living in an institutional setting. **UNIT: one hour**



(13) Health Screening: To provide a brief examination to determine need for more in-depth medical evaluation ~ referral when appropriate. **UNIT: one hour**

(16) Information: To give information about resources, programs, and services. (Does not attempt to facilitate appointments or other arrangements between the client and service provider.) **UNIT: one client served**

(19) Outreach: To provide information and encouragement about existing services and benefits to individuals. Primary outreach activity will be on a one-to-one basis, except when specifically targeted group presentations are deemed more appropriate for a particular outreach need. In such cases, the service provider shall assure that all participants will be counted in this unit.

**UNIT: one client served**

(21) Physical Fitness: To conduct activities, under qualified supervision, to sustain and improve the health and well being of a client, such as exercise sessions. **UNIT: one hour**

(29) Therapy: To provide treatment of a specific physical or mental problem or condition by a health professional or an allied health professional as permitted by law. Includes rehabilitative care such as physical, speech/hearing, and occupational therapies. (Does not include services covered by Medicare, Medi-Cal, or other health insurance.) **UNIT: one hour**

(32) Comprehensive Assessment: To collect information about a client with multiple needs (social, environmental, physical, or mental) and determine the necessary supportive or other appropriate services to meet those needs. (Does not include services covered by Medicare, Medi-Cal, or other health insurance.) **UNIT: one hour**

(36) Home Security: To provide clients services for the security and safety screening of their home environment, and by the provision of safety features such as: medical alert; grab bars; locks and deadbolts; and, smoke and burglar alarms. **UNIT: one client served**

(38) Equipment: To purchase one piece of equipment with a value of \$500 or more for a facility/center. **UNIT: one piece of equipment**

(46) Family Support: To provide counseling, support groups, and other support to families and caregivers of individuals with Alzheimer's disease or a disease of a related type.

**UNIT: one session**

(52) Nutrition Education: To provide regularly scheduled programs on nutrition, diet, and health promotion issues. Programs and materials are to be approved by a qualified dietitian/nutritionist. Methods of education may include demonstrations, audio-visual presentations, or small group discussions for congregate program participants. Handout materials may be used as the sole education component for home-delivered meal program participants. **UNIT: one presentation**

(53) Nutrition Counseling: To provide individual dietary evaluation counseling which relates to normal or therapeutic nutritional needs which is performed by a dietitian/nutritionist. Nutrition counseling may be made either in person or by telephone. **UNIT: one client counseled**

(54) Nutrition Screening: To collect information about a client's nutrition-related needs and problems; to evaluate the nutrition-related problems and needs of a client; and/or provide health care-related interventions to the client under the guidelines of the nutrition screening initiative. **UNIT: one client served**

### **Medication Management:**

AAA's are reminded that Medication Management became a required service with a separate funding allocation under Title III D in 2001 (see PM 01-03). Medication Management provides medication screening and education to an individual and/or the caregiver to prevent incorrect medication and adverse drug reactions.

**Insert the number of units of service in the Medication Management tables in the Title III/VII Service Unit Plan Objectives. Because of the nature of Disease Prevention/Health Promotion and Medication Management activities, the AAA's are also requested to continue providing written objectives for all services provided with Title III D funds. The objective should clearly explain the activity that is being performed to fulfill the service unit requirement. Include a brief written statement describing the Medication Management activities provided in the Year-End Report.**

**Funding for Medication Management should be noted on page 9 of the CDA Area Plan Budget, Schedule of Nutrition (III C-1&III C-2) & Disease Prevention (III D) programs.**

### **Activities that may be reported under Medication Management:**

Primary activities will be on a one-to-one basis, except where specifically targeted group presentations are deemed more appropriate. In such cases the presentation is counted as one unit.

Example:

- ✓ Contracting a pharmacist to speak at a congregate meal site about adverse drug reactions and issues of incorrect medication and perform a brown bag clinic. (Participants bring in all their medications to the site, so the pharmacist is able to review them for medication interactions.)

This is a group presentation with a one-on-one component. Count each one-on-one participant and place that number in the service unit plan. Be sure to provide the goal and objective numbers associated with the service units. The objective should clearly explain the activity is being performed to fulfill the service unit requirement.

Example:

- ✓ Contracting an RD to present a food and medication interaction presentation at a senior center.

This is a group presentation. Count as one unit.

**Fact Sheet—Long-Term Care Ombudsman**  
**Instructions for Completion of the Service Unit Plan Objectives**  
Contact Person: Joe Rodrigues, State Long-Term Care Ombudsman  
(916) 419-7510 [JRodrigu@aging.ca.gov](mailto:JRodrigu@aging.ca.gov)

**REQUIREMENTS:**

- Unit of Service—A unit of service shall be considered one closed case. Please identify the total number of closed cases for each year of the Area Plan cycle, the goal associated with the unit of service, and if applicable, any associated program goal and objective numbers.
- Training for Ombudsman Staff and Volunteers—Please identify the total number of training sessions (e.g., one-36 hour certification training = one certification training session and/or one ongoing training = continuing education training session), the total number of hours of certification training, the total number of hours of continuing education training to be provided, and the total number of trainees (duplicated) for each year of the Area Plan cycle.
- Visits—Please identify the total number of unduplicated visits to Skilled Nursing Facilities (SNF) and Residential Care Facilities for the Elderly (RCFE) (e.g., If the PSA has 57 SNFs, the unduplicated count will be no more than 57), for each year of the Area Plan cycle. Additionally, please list both the projected number of volunteers needed to accomplish these visits (this number may exceed the actual number of volunteers in the program), as well as the number of volunteers the program anticipates it will have available for each year of the Area Plan cycle.

**Fact Sheet—Title VII B Elder Abuse Prevention**  
**Instructions for Completion of the Service Unit Plan Objectives**  
Contact Person: Joe Rodrigues, State Long-Term Care Ombudsman  
(916) 419-7510 [JRodrigu@aging.ca.gov](mailto:JRodrigu@aging.ca.gov)

**REQUIREMENTS:**

- Unit of Service—A unit of service shall be considered one public education session or training session for professionals. Please identify the total number of sessions for each year of the Area Plan cycle, the goal associated with the unit of service, and if applicable, any associated program goal and objective numbers.
- Public Education Sessions—Please identify the total number of education sessions for the general public (community education, caregivers, non-professionals), that identify and prevent elder abuse, neglect, and exploitation, for each year of the Area Plan cycle.
- Training Sessions for Professionals—Please identify the total number and topics of training sessions for professionals (service providers, professional organizations, etc.) on identification, prevention, and treatment of elder abuse, neglect, and exploitation, for each year of the Area Plan cycle.
- Educational Materials Developed—Please identify the number of educational materials (brochures, curriculum, video tapes, etc.) for each year of the Area Plan cycle.
- Educational Materials Distributed—Please identify the number of educational materials distributed (this may include materials that have been developed by others) for each year of the Area Plan cycle.

## **APPENDIX X – PSA # \_\_\_\_\_**

**Check each applicable planning cycle:**

☐ FY 2005-06   ☐ FY 2005-06   ☐ FY 2006-07   ☐ FY 2007-08   ☐ FY 2008-09

### **Legal Assistance<sup>①</sup>**

This section must be completed and submitted with the Four-Year Area Plan.  
Any changes to this Appendix must be documented on this form and remitted with Area Plan Updates. This Appendix is to be completed electronically.

1. Specific to Legal Services, what is your AAA's Mission Statement or Purpose Statement? Statement must include Title III B requirements.
2. Based on your local needs assessment, what percentage of Title IIIB funding is allocated to Legal Services?
3. Specific to Legal Services, what is the targeted senior population and mechanism for reaching targeted groups in your PSA? Discuss:
4. How many legal assistance providers are in your PSA? Complete table below.

| Fiscal Year | # Legal Services Providers |
|-------------|----------------------------|
| 2005-2006   |                            |
| 2006-2007   |                            |
| 2007-2008   |                            |
| 2008-2009   |                            |

5. What methods of outreach are providers using? Discuss:
6. What geographic regions are covered by each provider? Complete table below.

| Fiscal Year | Name of Provider | Geographic Region covered |
|-------------|------------------|---------------------------|
| 2005-2006   | a.<br>b.<br>c.   | a.<br>b.<br>c.            |
| 2006-2007   | a.<br>b.<br>c.   | a.<br>b.<br>c.            |
| 2007-2008   | a.<br>b.<br>c.   | a.<br>b.<br>c.            |
| 2008-2009   | a.<br>b.<br>c.   | a.<br>b.<br>c.            |

7. How do older adults access Legal Services in your PSA? Discuss:
8. What are the major legal issues in your PSA? Include new trends of legal problems in your area: Discuss:
9. What are the barriers to accessing legal assistance in your PSA? Include proposed strategies for overcoming such barriers. Discuss:
10. What other organizations or groups does your legal service provider coordinate services with? Discuss:

<sup>①</sup> For information related to Legal Services, contact Chisorom Okwuosa at 916 419-7500 or COkwuosa@aging.ca.gov

## **APPENDIX XI – PSA #**

**Check each applicable planning cycle:**

☐ FY 2005-06

☐ FY 2006-07

☐ FY 2007-08

☐ FY 2008-09

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### **Disaster Preparation Planning Conducted for the 2005-2009 Planning Period**

OAA Title III, Sec. 310, CCR Article 2, Section 7529(a) (4) and Section 7547

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**All of the items below must be discussed at each planning cycle's Public Hearings**

**Please provide narrative answers to the following questions. The text boxes following the questions have been formatted to type your answers.**

1. Describe AAA's disaster plan. The plan shall ensure the provision of critical services that will meet the emergency needs of consumers the AAA is charged to serve during medical or natural disaster, such as earthquakes or floods.

2. Describe how AAA would coordinate its disaster response with the local Office of Emergency Services.

3. Identify the local Office of Emergency Services contact person your AAA would coordinate with in the event of a disaster:

name:  
telephone number:  
e-mail address:  
address:

4. Identify your:

**AAA Disaster Response Coordinator**

name:  
telephone number:  
e-mail address:  
address:

**AAA Back-up Disaster Response Coordinator**

name:  
telephone number:  
e-mail address:  
address:

5. Has your Information and Assistance staff been provided written emergency procedures on how to provide services during and after a disaster?

- ☐ Yes  
☐ No

If No, Explain:

6. Describe your emergency and disaster training curriculum and the frequency this training is provided to AAA staff that work directly with older individuals.

## **APPENDIX XII – PSA #**

**Check each applicable planning cycle:**

☐ FY 2005-06    ☐ FY 2006-07    ☐ FY 2007-08    ☐ FY 2008-09

### **Baby Boomer Information**

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**To provide an understanding of how AAAs are planning to meet the challenges of the increasingly growing and diverse aging population identified as “Baby Boomers” AAAs are required to answer the following questions:**

1. How can we best integrate service systems for the elderly and adults with disabilities while, at the same time, acknowledging and responding to differences between these population groups? (Examples might include use of telemedicine, Internet technology, computer access for communication purposes, etc.)
  
2. Who are the key stakeholders whose commitment and partnership are essential? (Examples might include health care providers, education and training institutions, major employers, etc.)
  
3. How can we assure we help empower individuals to remain as independent and engaged as possible for as long as possible? (Examples might include consumer surveys, customer friendly access to services, education, information sharing, etc.)



4. How can the arrangement of services be delivered to the consumer in a seamless, coordinated manner, regardless of program administration and jurisdiction? (Examples might include suggestions from consumers, stakeholders, program providers, program administrators, etc.)
  
5. What administrative hurdles and barriers to change need to be overcome at both the state and county/local level? (Examples might include an inability to “think outside the box,” poor communication, lack of awareness, etc.)
  
6. How do we provide a leadership and advocacy role in the development of service system standards that are uniform and not dependent upon income? In other words, how do we avoid having separate (and unequal) systems of care for low, moderate, and upper-income persons? (Examples might include using existing association organization meetings to review standards, consumer review, etc.)
  
7. How do we assure quality standards are maintained or developed across services regardless of the funding source and/or the service provider? (Examples may include consumer determination of quality, focused monitoring of service provision including consumers, testing new service delivery methods before finalizing standards, etc.)

## **APPENDIX XIII – PSA #**

**Check each applicable planning cycle:**

☐ FY 2005-06    ☐ FY 2006-07    ☐ FY 2007-08    ☐ FY 2008-09

### **REQUIRED SERVICES PROVIDED WITHOUT THE USE OF STATE AND/OR FEDERAL FUNDS**

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**Some AAAs provide required services using funding sources other than State and/or Federal funds. Complete the chart below indicating the services your AAA provides not using State or Federal funds.**

| <b>Program</b>                                  | <b>Funding</b>                                 |
|---|--|
| Example: Title III B Information and Assistance | Example: County funds used to provide program. |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |

**How will the AAA assure that these services are coordinated within the Planning and Service Area?**